01-13-07-PART B - FEE(S) TRANSMITTAL

JAN 1 7 2007	FICE	her with applicable	or <u>Fax</u>	Commission P.O. Box 14 Alexandria, (571)-273-2	ner for Pate 50 Virginia 22 885	2313-1450			
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.									
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CHARLOTTE, 1 01/18/2007 HDESTA2	Barbara C. Brown (Depositor's name)								
01 FC:1501		42	arkar	a C. Bri		(Signature)			
02 FC:1504		00 OP 00 OP				<u> </u>	-17-2007	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTO	RNEY DOCKET NO	. CONFI	RMATION NO.	
09/838,320	04/19/2001	•	Peter B. Everdell			10.0815		1320	
TITLE OF INVENTION: NETWORK DEVICE INCLUDING DEDICATED RESOURCES CONTROL PLANE									
			•	•					
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	DUE PREV. PA	ID ISSUE FEE	TOTAL FEE(S)	UE	DATE DUE	
nonprovisional	YES No	\$700 \$1400	· \$300		\$0	\$1,000 \$	1700	03/01/2007	
EXAMINER ART UNIT			CLASS-SUBCLASS						
COULTER, KENNETH R 2141		2141	712-011000			•			
1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list CFR 1.363). (1) the same of up to 2 resistant extension CLEMENTS WALK								WAIKER	
CFR 1.363). Change of correspondence of corresp	ondence address (or Cha B/122) attached.	inge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a ringle firm (having as a member a compared to the part of the						
"Fee Address" ind	registered attorney or agent) and the names of up to								
PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)									
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(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
CIENA Corporation Linthicum, MD									
Please check the appropriate assignee category or categories (will not be printed on the patent):									
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)							ove)		
Issue Fee Publication Fee ()	A check is enclosed.	Payment by credit card. Form PTO-2038 is attached.							
Advance Order -	The Director is h	The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).							
5. Change in Entity Sta	ntus (from status indicate		b. Applicant is n				7 CFR 1.27(§	<u></u> g)(2).	
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CPP									
Authorized Signature	·	Date January 17, 2007							
Typed or printed name Christopher L. Bernard Registration No. 48,234									
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